	e for form 1449A		o, no persons t	are required to respond to a concenion of	or information unless it contains a valid Ovid Control number.	
INFORMATION DISCLOSURE					Complete if Known	
STATEMENT BY APPLICANT				Application Number	10/630,062	
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				First Named Inventor	Christopher A Wiklof	
				Art Unit	2876	
				Examiner Name	Daniel St. Cyr	
(1	(Use as many sheets as necessary)					
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